



DONATION PROPOSAL APPLICATION CITY OF KEARNEY

Application should be completed and submitted to the Kearney City Clerk. Please attach any supporting information as needed.

Date: _____

Applicant / Contact Person: _____

Address: _____

Phone: _____ Email: _____

Donation Type:

Monetary (unrestricted)

Service / Labor

Monetary (restricted)

Material / Equipment

Land / Real Property

Memorial Item

Facility Enhancement

Partnership

Other (please define): _____

Donation description:

Location (If applicable, where are you proposing to donate the item(s)? maps, photos are encouraged. Please be specific):

Amount, or value, of donation:

Is it the desire of the donor to name or rename any amenity or facility? Yes or No
If yes, please explain:

If applicable, wording on recognition if desired:

As the applicant and donor I have read and understand the City of Kearney Donation Policy. My signature indicates the desire for the proposed donation to be considered by the City of Kearney.

Applicant's Signature: _____ Date: _____

Thank you!

For City use only

____ Donation accepted by the City of Kearney

____ Donation not accepted by the City of Kearney

Reason(s) for not approving:

____ Endowment Required: ____%

____ Memorandum of Understand Required

____ Contingency Required: \$ _____

Application Reviewed By:
